

# CLAIMS ONLY

SERIAL NO \_\_\_\_\_ FILING DATE \_\_\_\_\_

APPLICANT(S) \_\_\_\_\_

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/					
2	/					
3	/					
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46						
47						
48						
49						
50	14					
TOTAL IND.	3					
TOTAL DEP.	3					
TOTAL CLAIMS	3					

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS